



Small Business and Health Insurance – Difficult Choices

Michigan House of Representatives
Health Policy Committee
March 3, 2009

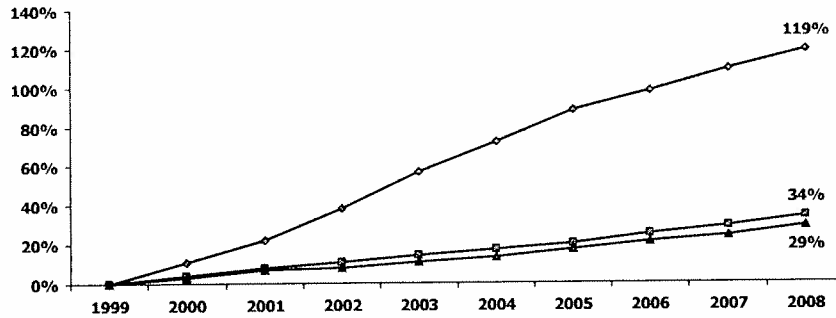


Health Insurance Costs are Killing Small Businesses



WE'LL TELL YOU WHERE IT HURTS.
SAVE MEDICAL COVERAGE FOR SMALL BUSINESSES.

Cumulative Changes in Health Insurance Premiums, Inflation, and Workers' Earnings, 1999-2008



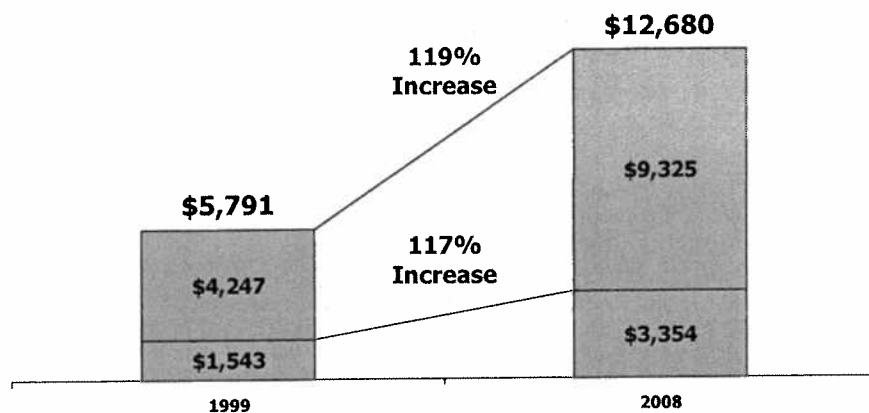
Note: Due to a change in methods, the cumulative changes in the average family premium are somewhat different from those reported in previous versions of the Kaiser/HRET Survey of Employer-Sponsored Health Benefits. See the Survey Design and Methods Section for more information, available at <http://www.kff.org/insurance/7790/index.cfm>.

Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 2000-2008. Bureau of Labor Statistics, Consumer Price Index, U.S. City Average of Annual Inflation (April to April), 2000-2008; Bureau of Labor Statistics, Seasonally Adjusted Data from the Current Employment Statistics Survey, 2000-2008 (April to April).

—◇— Health Insurance Premiums
—□— Workers' Earnings
—▲— Overall Inflation



Average Health Insurance Premiums and Worker Contributions for Family Coverage, 1999-2008



Note: The average worker contribution and the average employer contribution do not add to the average total premium due to rounding.

Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2008.

■ Employer Contribution
■ Worker Contribution



Cost is THE Issue for Small Business

- 90% of SBAM members consider it at the top or near the top of list of *Serious Issues facing Michigan*
- 91% of small businesses that do not offer health insurance cite cost as the reason
- Fastest growing cost of doing business in Michigan

A Small Business Story

- 30 Employee Manufacturer in Traverse City
- Growing Company – Growing HC Costs
- Utilized cost Containment Strategies
- Competitiveness demanded other options
- Individual Market – A “Cheaper” Option
- The Deal
- The Results

Seeking Policy Solutions for Michigan's Uninsured

- State Planning Project for the Uninsured
 - Finished work in August, 2006
 - Successor Council
- Michigan Health Insurance Access
Advisory Council

The Council must be:

- Independent
- Bi-partisan
- Non-profit
- Non-governmental
- Diverse in membership
- Long-term
- Inclusive of all who wish to participate

Michigan Health Insurance Access Advisory Council - Mission

- To achieve affordable health insurance coverage for all Michiganians
- To educate the public and decision-makers about issues relating to lack of health insurance
- To conduct research on issues related to health insurance financing
- To advocate for change related to the accomplishment of these purposes.

Board of Directors

- 29 Board Members including:
 - **Providers**
 - **Businesses (large and small)**
 - **Consumers**
 - **Insurers**
 - **Labor**
 - **Universities/faith-based organizations**

MHIAC

- First Board Meeting – Jan. 18, 2007
- Economics of Health Care Study
- Michigan First ?
- Board Process
- Public Education Campaign
- Policy Solutions

The Search for a Michigan Solution

- Magic Bullets, Crazy Quilts, and Puzzles
- Preserving an Employer-based system ?
- “Universal Coverage” or universal coverage?
- A new way of Policy Making in Michigan
- What will Washington do...or not do?

Emerging Policy Template

- Medicaid Expansion
- Individual Responsibility
- Employer Responsibility
- Cost Drivers
- Public Financing
- National or State Solutions?

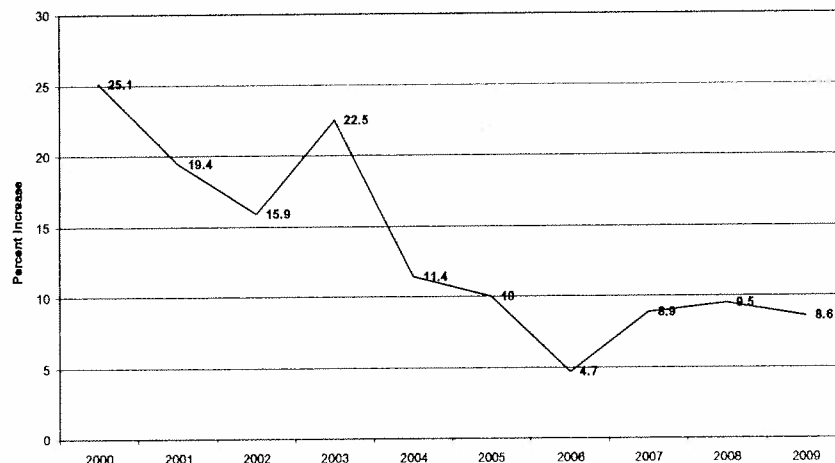
Tipping Point ?

- **Michigan Employer Health Insurance Survey (2006)**
 - ☐ 59.4% No impact on employee recruitment
 - ☐ 61.0% No impact on employee retention
 - ☐ 66.6% No impact on employee health
 - ☐ 49.8% Can attract good employees without it
 - ☐ 10 % Considering no longer offering health insurance next year

Protectors of the Small Group Market

- Generally considered “Not Self-insured”
- 2-50 covered employees
- State Legislated and Regulated
- BCBSM vs. Other Carriers
- Rating Bands – NAIC Model Legislation

Small Group Market
Blue Cross Blue Shield of Michigan Rate Increases (1st Qtr)



Small Group vs. Individual Market

- Relative Rates
- Small Business Subsidy of Individual Market (BCBSM)
- Two sets of rules
- NAIC Model Legislation
- Be wary of national regulation of markets

Cost Drivers (with Policy Solutions)

- Bad Health - Wellness Initiatives
- Mandated Benefits – Essential Benefits Plan
- Medical Errors - Health IT, Medical Liability issues, Practice Protocols, etc.
- Catastrophic Claims – Pooling, Reinsurance, Public funding
- Cost Shifting – Inadequate Reimbursement, Uninsured



Thank You!

Questions?

SBAM Policy Priorities - 2009

Whether it's fighting tax increases and regulation on small business, or working to control energy and health care costs, SBAM is on the front lines working for you. Here are SBAM's policy positions.

The Small Business Association of Michigan (SBAM) is an alliance of over 5,000 small businesses across Michigan who employ more than 70,000 workers. We were founded by Michigan small business owners to make sure that government hears the voice of small business. Small business is our only cause.

We believe that what is good for Michigan's small businesses is good for Michigan. Small businesses are clearly driving the job growth that is occurring in Michigan. If we hope to turn Michigan's economy around, we need better policy that supports small businesses. Unfortunately, there are far too many examples in Michigan's recent history where this has not been the case.

Nearly everyone knows the Aesop Fable about the Goose that lays the Golden Eggs. Everyone wants the golden eggs, and in Michigan the common sentiment is that we just don't have enough of them. Those golden eggs include good paying jobs, funding for our schools, safe communities – the list goes on and on. These priorities are very important, and small business owners support them too. No one wants cuts in services, but when compared to doing further harm to the goose, the choice is clear. To put it simply, fewer geese equal fewer golden eggs. Until we start doing a better job of protecting and supporting the golden goose, we will always struggle to have enough golden eggs. Small business is Michigan's golden goose.

This SBAM agenda is about how we can create a better environment for Michigan's golden goose. Here is where SBAM stands on the issues that matter most for small businesses:

SBAM on Taxes and Spending

- The surcharge placed on the Michigan Business Tax (MBT) must be repealed. The surcharge is a major obstacle that stands in the way of job growth. In the absence of an outright repeal, immediate action should be given to reducing the rate until it is repealed. Bottom line: protecting small business from high taxes means that those small businesses will have more money to grow their businesses, hire more employees, and pay good wages.
- No new tax breaks for specific companies or industries should be signed into law until the MBT surcharge has been repealed. The current policy of giving tax breaks to specific companies or industries is a major impediment to our goal of broad tax relief for job providers. Broad tax relief, such as the repeal of the surcharge, will have the greatest impact on job creation for Michigan. Until we are able to provide this relief, we should stop issuing credits to the special few.
- We must cut government spending. The current level of state spending is simply more than taxpayers can afford. Last year's budget included a 42% tax increase on job providers – the last thing Michigan needed in this poor economy. There are currently many government reform proposals that deserve support. Examples include corrections reform such as detailed by Public Sector Consultants (among others) as well as state

employee benefit reform. SBAM has shown how hundreds of millions of dollars could be saved if state employees received health benefits similar to what most small business employees receive.

- SBAM stands ready to strongly support any elected official who takes the risk of proposing and fighting for tough budget cuts. We do not argue that cutting government spending is easy. There are hundreds of special interests who fight to get more money from the state. SBAM pledges to fight alongside those who show leadership and stand up to the special interests that fight against government reform.
- The Small Business Alternative Profits Tax should be expanded so that more small businesses are eligible. We oppose officer compensation being used as part of any definition of small business for the purposes of determining who qualifies for the small business alternative tax. Tax relief for these businesses will mean more jobs.
- Permanently end the Estate Tax. In 2001, federal legislation passed that incrementally reduced the estate tax rate and increased the exemption until 2009. That tax is completely eliminated in 2010, but it comes back in full-force in 2011. Michigan's estate tax is tied to the federal tax and that has led to the current situation where Michigan does not have an estate tax. Should the federal estate tax be re-established in 2011, the state estate tax will also be back in effect. One-third of small businesses today would have to sell or liquidate part of their firm should they have to pay estate taxes if it is to come back in full. Action will be necessary to protect small businesses from this burdensome and unjust tax.

SBAM on Regulation

- The vast majority of small business owners will make the right decisions for their business, their employees, and the environment without additional, burdensome regulations. Unfortunately, new ideas come from Lansing on a regular basis to regulate business in new ways. This additional red tape makes it harder for businesses to succeed. Here are just a few recent proposals that SBAM opposes:
- Mandated ergonomic standards. This proposal would require that every single business have ergonomics training and policy guidelines for their business.
- Mandated benefits. For example, some have proposed that businesses be required to provide seven days paid sick time. This would add to the cost of doing business and could lead to less hiring, reduced wages or even lay-offs. Small job providers don't have a magic wand to bring more revenue in the door to pay for these additional costs.
- Smoking ban. There are small businesses that depend upon the patronage of Michigan citizens who smoke. A ban on smoking will harm these businesses and the economy when Michigan can afford it the least.
- Intrusions into the at-will relationship between Michigan's employers and employees. We believe it is the right of the business owner and the employees to negotiate their terms of employment in good faith. More red tape also increases the likelihood that job providers will be subjected to unwarranted lawsuits.
- Comparable worth proposals. These proposals would have the state decide that certain professions require similar experience and skills and thus should be compensated equally. In other words, it could be decided that nurses, engineers, and teachers all require comparable education, experience and skills, so they should all be paid the same. This would be a massive government intervention into the marketplace and could add a whole new level of red-tape for small businesses to contend with.

- SBAM Opposes the Union Card Check legislation. SBAM opposes taking away the secret ballot for employees to determine if they wish to unionize. The right of small business owners to have a dialogue with employees about the consequences of unionization should be preserved.
- The federal and state level minimum wage should not be raised or indexed to inflation. Raising the minimum wage will not only raise the costs for many small businesses who are struggling to grow or even survive, it will also result in more job loss.

SBAM on Health Care

- Steps must be taken to reduce the growing cost of health insurance. Providing health insurance is becoming a larger and larger part of the budget for many small businesses. Developing innovative ways to control, and not add to these costs, could play a huge role in turning around Michigan's economy.
- Market-driven approaches to health care should be enhanced. SBAM is a strong supporter of Health Savings Accounts that put the individual back in the loop of health care and health care cost. This approach encourages people who seek medical care to consider the cost of that care – which can eventually help to control the overall cost of health care. More should be done to encourage greater use of these tools.
- Government attempts to mandate insurance benefits should be strongly opposed. These mandates add real and administrative costs and fail to resolve the problems of access to affordable health care. In fact, increasing costs through additional mandates only ensures that MORE people will become uninsured. Employers should be permitted to negotiate with employees as to the appropriate level of health care benefits without undue government regulation.
- Reform of the Individual Health Insurance Market is necessary. The legislature should take action soon to reform this market. In the current situation, the small group market subsidizes the individual market. This means that small businesses pay more for health insurance. As these costs rise, more small businesses will be unable to provide health insurance. Reforms such as rate bands are critical to eliminate “cherry-picking” and ensure that some companies don’t game the system to only insure the healthy – those who are least likely to need insurance.
- More should be done to encourage wellness programs. Options include the establishment of health insurance rating criteria that give economic incentives to small businesses that implement wellness initiatives and providing tax credits to encourage employer-based wellness programs. More can and should be done to improve the use of technology in health care.
- Michigan would greatly benefit from a statewide comparative health care data system that provides data and information on health care costs and concrete measures of quality.
- SBAM supports adopting a common electronic communications infrastructure so that a patient’s health records are accessible whenever that patient needs care.
- SBAM supports requiring physicians to order medication via computer – as opposed to handwritten and therefore easily misread orders. This has been shown to reduce errors by as much as 50%.
- We should not pay for medical mistakes. If a mistake is made during surgery that requires the surgery to be re-done, the patient or their insurance carrier pays for both surgeries. We should pay more for quality care and less (or nothing) when egregious mistakes occur.

SBAM on Entrepreneurship

- We need innovative approaches to increase the amount of capital available for entrepreneurs. We support efforts that would allow the state to use a small part of its pension funds to invest in entrepreneurial Michigan businesses. Also, any state fund created to invest in Michigan companies and to create jobs should make sure to focus investments in companies that have the best plan to commercialize – not on basic research. We should also broaden the focus of state investment beyond specific industries.
- Entrepreneurial Education should be a higher state priority. State government should promote and support Entrepreneurial Degree Programs at our universities and community colleges, and ensure that entrepreneurial skills and education are incorporated into the curriculum for our K-12 schools.
- More must be done to get university research from the lab to the market. The state should make the commercialization of research done at our state universities a higher priority. State government should do a better job of measuring results and use the incentives at its disposal to improve those results.
- The state should place more priority on the “gardening” approach to economic development. The gardening approach is where the focus is on providing tools and creating the right climate for Michigan’s small businesses to grow. Without taking anything from the “hunting” approach, where the focus is on attracting large companies that will provide a large number of jobs, we believe that gardening will play a greater role in Michigan’s economic resurgence.

SBAM on Government Programs

- SBAM strongly supports the “Michigan Business One Stop.” Efforts have been underway to implement a web-based portal to make working with state government more simple and efficient. SBAM strongly supports this project and has been working closely with the Granholm administration on the planning and implementation. Small business owners should be able to visit one website and make one call to one office to obtain all the information needed – and begin all the paperwork necessary – to open, maintain or grow a business.
- Automatic increases in unemployment benefits will harm small business. Providing automatic increases adds to the cost of doing business in Michigan at a time when our economy can afford it the least. More steps should be taken to combat fraud and waste in the system to protect small businesses from additional charges like the solvency tax.

For more information about SBAM and any of our issue positions, please contact us at (800) 362-5461, email us at smallbusinesschampions@sbam.org. Let us know if you want to receive our e-mail updates! SBAM. Making sure the voice of small business is heard!

SBAM

Newsroom

News Release

Date: Oct 18 2007 2:55PM

SBAM Testifies Before Legislature in Support of Individual Market Insurance Reform

The House Insurance Committee in Lansing reported out a four-bill package that would allow an arm of Blue Cross Blue Shield (BCBS) to offer insurance to individuals. SBAM supports the legislation. SBAM's Vice President for Products and Services Scott Lyon testified before the committee. His testimony follows:

My name is Scott Lyon, and I am Vice President of the Small Business Association of Michigan, often referred to as SBAM. We are a state based trade association representing over 5,000 small businesses from across Michigan. We have members with one employee to 499 employees from every type of business and in every Michigan County. We offer small group health insurance programs that cover more than 4,000 businesses, over 25,000 employees and nearly 75,000 individuals. We have experience with group health insurance and a growing experience with individual health insurance plans.

Through our small business services area we offer a variety of health insurance programs, as well as Health Savings Accounts and Health Reimbursement Arrangements, Section 125 and COBRA administration. All the services we offer are intended to lower the cost and administrative hurdles that many times get in the way of offering high quality and competitive health insurance.

The Small Business Association of Michigan stands in support of individual market reform. Access to affordable health insurance is the number one issue for small business owners in Michigan and across the country. Every month we see small business owners dropping their group insurance plans because they can no longer afford to offer health insurance as an employee benefit. We wish this was not the case, but the reality is that it is happening every day. As group health insurance is dropped, the small business owner and their employees turn to the individual market for coverage. My experience tells me that the individual market is one with many potholes and these potholes need to be filled in. The legislation in front of you will help pave the way.

Our support of individual market reform is drawn from our understanding and observation of the market, and on the results that Small Group Market Reform has brought to our members. SBAM was at the forefront of that debate and there are many arguments from that debate that match to this debate.

First, let me tell you about a call we received a while back from one of our members from near Traverse City. This member was mad at SBAM, mad at her insurance agent and mad at BCBSM. She thought she had discovered a conspiracy to keep her company in a group health plan, and she thought individual health plans were less expensive. Despite the conversation, she dropped her group plan and through an increase in pay gave each of her employees cash to buy health insurance – about \$300/month. What she discovered after the fact, was that of her 30 employees only about half actually bought insurance for themselves and their families. Some were young and bullet proof and didn't think they needed coverage, others found insurance in the individual market, and still others applied for, but were denied coverage or were priced out of the individual market. They then turned to BCBSM for coverage at a rate much higher than their fellow employees were able to find. This is a

good example of how the individual market works today. The younger and healthier you are, the better chance you have to find coverage at an affordable price. The older and sicker you happen to be, your choices narrow and your prices skyrocket up. Of course, this caused some employee relations problems within the company and she is now going to reestablish group coverage. Individual Market reform will not solve all the problems this member encountered, but it will fix many of them.

Some of the things that we believed during the small group market reform debate and we still believe:

- A level playing field results in a more competitive market, and prevents some of the abuses that we saw in the small group world and that we are seeing today in the individual market.
- A clear set of fair and understandable rules will draw more carriers to the Michigan market. We believed this to be true during the small group debate and our belief has now turned into reality, we have more carriers in the market today than we had a few years ago. The same could be true of the individual market.
- All carriers (BCBSM, HMOs, commercial insurers) operating in the market should be treated the same, or with very similar rules, regarding allowable rating practices, rate filings, and rate approvals. Rating practices and methodologies must be applied consistently for all Michigan insurers. All carriers should have the same ability to price their products using rational loss ratios that allow them to pay claims without cross subsidization from other pools. Uneven rules can lead to gamesmanship, market skimming and cherry picking.
- Every carrier operating in the market in Michigan should establish reasonable rate bands with a sensible relationship between the lowest price and the highest price. Only allowable case characteristics should be used for determining the rate within the band.
- We believe that reasonable case characteristics include, because Michigan is a big and diverse state, geography, and then age, gender, health status at the time of enrollment, and some wellness related activity – for example a discount for participating in a wellness program and a penalty for smoking or other unhealthy behaviors.
- Federal continuation laws require carriers to renew coverage, but those same laws do not speak to the price and price increases. Therefore, annual rate increases should not be determined by the health of the individual and should be capped at a reasonable amount – after all, to use premium increases as a weapon and price an individual out of the market because they got sick after they bought health insurance accomplishes the same goal as flat out declining to renew coverage.
- Thank you for your attention and thoughtful vote this morning. I would be happy to answer any questions.

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For more information contact Scott Lyon at (800) 362-5461 or email sjl@sbam.org.

SBAM

Newsroom

News Release

Date: Jan 16 2008 4:52PM

SBAM Helps Lead Consumer Coalition to Support Insurance Reform

A broad coalition of Michigan businesses, trade associations, labor organizations and citizens' groups, including SBAM, announced Wednesday that they have formed Consumers for Fair and Affordable Insurance Reform, a coalition to support individual market reform to Michigan's insurance laws.

Rob Fowler, President and CEO of the Small Business Association of Michigan, is Chairman of the group. John Truscott, President of The John Truscott Group has been named its Executive Director.

"The individual insurance market is one of the fastest growing markets in Michigan as workers take buyouts or frankly, lose coverage from their employer. This legislation creates a level playing field in this market and helps meet the needs of consumers," said Fowler.

Michigan's current regulations have not kept pace with the rapid changes in the state House Bills 5282 and 5283 reform the individual insurance market in Michigan by creating a fair, standardized system for consumers who buy their own health care coverage.

"A level playing field results in a more competitive market and prevents some of the abuses that we see in the individual market – insurers only offering coverage to the young and healthy or the rapid escalation of premiums when an individual gets sick and files claims," Fowler said. "These unfair practices guarantee that costs for everyone else increase dramatically."

The coalition came together in order to support and promote the legislation and help correct the misinformation that has been prevalent in the media. Just as opponents made inaccurate claims several years ago regarding small group insurance reform, some of the same tactics have been used against this legislation.

"These are common sense bills that ensure citizens and small business owners are treated fairly by insurance companies. People buy insurance so that if they get sick, they are able to get the health care they need. These bills simply require that insurance companies live up to their promise of providing coverage should you have the misfortune of really needing it," said Fowler.

The CFAIR coalition will be setting the record straight in the weeks to come. The coalition also expects to expand its members now that the formal coalition has been announced. In addition, the coalition will launch an information web site tomorrow, January 17th. The address will be www.fixhealthinsurance.com.

<http://www.sbam.org/news.php?id=891>



Michigan Health Insurance Access Advisory Council
27300 W. 11 Mile Road, MC B794
Southfield, MI 48034
Telephone: 248.448.5056 / Fax: 248.448.8055

History:

The Michigan Health Insurance Access Advisory Council (MHIAC) was created to develop realistic strategies to extend health insurance to all Michigan residents. MHIAC is the successor council to the Michigan State Planning Project for the Uninsured Advisory Council, which was a Michigan Department of Community Health initiative funded by a federal Health Resources and Services Administration (HRSA) grant.

Purpose:

- Incorporated in December 2006, MHIAC is a non-profit organization with an independent, non-partisan approach. Its mission is to identify and implement strategies to ensure all Michigan residents have access to affordable health insurance coverage. MHIAC is committed to improving the health status of Michigan residents, controlling health care costs for individuals, employers and the state, and maximizing the efficiency of health care expenditures.

What Makes MHIAC Unique

- MHIAC is different from other organizations that are attempting to address the issue of the uninsured because it includes representation from a broad range of Michigan groups from varying perspectives who are committed to working collaboratively on issues of the uninsured so all Michigan residents have health insurance coverage.
- MHIAC held its first board meeting in January 2007. Its board membership includes small and large businesses, consumer groups, faith-based groups, health care providers (groups representing health care professionals and facilities), insurers and labor unions.

Membership in MHIAC

- Membership is open to any and all individuals and organizations that support and seek to further the purposes of MHIAC.
- MHIAC will hold a general membership meeting once or twice a year. At these meetings, members will be able to voice their views about current initiatives and shape MHIAC policy recommendations.
- Members are able to serve on committees through which much of the work will be accomplished and presented to the Board for formal action.
- The MHIAC nominating committee will look to membership in the Council as a major source for identifying new members of the Board of Directors.

What MHIAC is Doing Today:

One of MHIAC's initial goals is to educate the public and key stake holders about the effect that having up to one million uninsured Michiganians has on businesses that provide health insurance, individuals who are insured, health care providers, taxpayers, our economy and the future of Michigan.

MHIAC will also commission a finance study to assist members in understanding the economics of health care in Michigan. This innovative study will be used to test the impact of various health care insurance options and will be used by the MHIAC Board to develop a proposal to provide health insurance to all Michiganians. Once MHIAC's recommendations are developed, we will use our collective leadership to move ideas forward among our members, the public and government policy makers.

For more information please contact Carolyn Wiener at 248.448.5056 or at mhiac@sbcglobal.net



Michigan Health Insurance Access Advisory Council Board of Directors

Officers

- **Chair:** Rob Fowler, President and CEO, **Small Business Association of Michigan**
- **Vice Chair:** Larry Horwitz, President, **Economic Alliance for Michigan**
- **Vice Chair:** Brian Peters, Senior Corporate Vice President, Organization and Strategic Development, **Michigan Health and Hospital Association**
- **Treasurer:** G. Elaine Beane, Program Director, Center for Advancing Community Health, **Michigan Public Health Institute**
- **Secretary:** Marjorie J. Mitchell, President, **MichUHCAN**
- **At Large:** Lynda Rossi, Vice President of Public Policy and Social Mission, **Blue Cross Blue Shield of Michigan**
- **At Large:** Edward A. Wolking, Executive Vice President, **Detroit Regional Chamber**

Board Members

- Chris Allen, Executive Director and CEO, **Detroit Wayne County Health Authority**
- Vernice Davis Anthony, President and CEO, **Greater Detroit Area Health Council**
- Mark T. Gaffney, President, **Michigan AFL-CIO**
- Reverend Patrick Gahagen, Pastor of Immanuel Lutheran Church and Chairperson of the MOSES Healthcare Taskforce, **MIVoice/MOSES**
- Stephen J. Gools, State Director, **AARP**
- Charles Hadden, President and CEO, **Michigan Manufacturers Association**
- Sister Monica Kostielney, President and CEO, **Michigan Catholic Conference**
- Debbie Lantzy-Talpos, Head of Michigan Markets, **AETNA**
- Richard Murdock, Executive Director, **Michigan Association of Health Plans**
- Dennis Paradis, Executive Director, **Michigan Osteopathic Association**
- Sharon Parks, President and CEO, **Michigan League for Human Services**
- Claudia Pearce, Co-Chair, **Change-to-Win**
- Kim E. Ross-Jessup, Government Relations Manager, **Pfizer**
- Joe Ross, Past Chair, Health Committee, **Michigan Chamber of Commerce**
- Iris Salters, President, **Michigan Education Association**
- Kim E. Sibilsy, Executive Director, **Michigan Primary Care Association**
- Steven Skorcz, President and CEO, **Greater Flint Health Coalition**
- Dee Tyler, Vice Chair, **Coalition of Michigan Organization of Nurses**
- Lody Zwarenstejn, President and CEO, **Alliance for Health**

